

A Bi-weekly Publication

Friday, November 15, 2002

abetes Conference Promotes Patient Education

"We need consistent and aggressive intervention to improve the long-term health outcome for persons with diabetes."

That's what State Health Commissioner Greg Wilson, M.D. told the "Too Sweet for Your Own Good" diabetes conference November 2 in Indianapolis. The conference, intended primarily for minority populations, attracted 250 Hoosiers who have diabetes.

Dr. Wilson quoted statistics for Indiana from the American Diabetes Association (ADA), which show that diabetes results in 4,400 deaths, 1,500 amputations, hundreds of cases of blindness, and more than 2,000 people receiving dialysis or kidney trans-



SENIOR ATTENDEES at "Too Sweet for Your Own Good" conference get into the swing of physical activity, a vital component of reducing the adverse health effects of diabetes. Don Beeler, ISDH Local Liaison Office (center, 2nd row from front), was there to observe and partici-

Photo by Perry Johnson

plants each year.

"These are startling statistics," Dr. Wilson said, "because diabetes is a disease that causes severe complications throughout the body. But, by

properly managing diabetes, individuals can dramatically reduce the risk of complications and lead productive lives."

The latest statistics available show diabetes as the fourth leading cause of death in Indiana for African Americans. Native American Indians/Alaskan Natives. and Asian Americans/Pacific Islanders.

Dr. Wilson noted that the "Too Sweet for Your Own Good" conference focused on minority populations, in particular, because they often

do not have access to the information they need to properly manage their disease.

"There is a need to address the

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Immunization Awards Conferences Review Latest Changes in Vaccines and Procedure







THE 2002 IMMUNIZATION AWARDS CONFERENCES hold forth at regional locations, north in Syracuse (left), south in Clarksville (center), and central in Lafayette. In SYRACUSE on October 21, Donna Weaver, Centers for Disease Control and Prevention (left), discusses recommendations for the use of vaccines for 2002-2003. Richard D. Clover, M.D. (left, center photo), provides an update from the National Advisory Committee on Immunization Practices at the CLARKSVILLE conference, and an "Ask the Experts" panel in WEST LAFAYETTE (right photo) fields questions from attendees: the panel members (I. to r.) are Michael Runau, ISDH Immunization Program Manager; Christopher Belcher, M.D.; Charlene Graves, M.D.; and Donna Weaver.

The Indiana State Department of Health held three regional changes in vaccination rule changes and procedures.

Conference registrations totaled 550 persons, representing, conferences for local health departments and medical prac- in approximately equal numbers, public and private sector imtices in north, south, and central Indiana during October to munization providers. Donna Weaver, CDC immunization recognize those agencies and providers with high vaccina- educator, and a conference keynote speaker, said that, of all tion series completion rates. The conferences also reviewed the other states, only populous California approximated

Photos edited from video by Dennis Rediker

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Newborn Screening Program to Add 17 New Tests

Indiana's Newborn Screening (NBS) programs will begin monitoring the results of 17 new "heel-stick" screening tests mandated for every newborn infant in Indiana before the end of 2002. The tests are required by legislation passed by the Indiana General Assembly.

The added tests will bring the total number of mandated heel-stick genetic screening tests to 25. A single heel stick of each newborn infant in Indiana is used to obtain blood for the 25 tests.

The Newborn Screening Program exists to provide early identification of a range of genetic disorders so that early interventions can ameliorate or reduce underlying genetically-related health problems.

Charlene Graves, M.D., ISDH medical director for newborn screening, explained what the 17 new tests will mean.

"When the newborn metabolic stesting is expanded by a method named tandem mass spectrometry, 17 additional inborn, very rare disorders will be able to be tested for on a filterpaper blood sample. These disorders generally affect body systems involving fatty acids, amino acids, or other organic acids.

These disorders can result in severe developmental delay, acute illness, and death. Therapies are available for some of these disorders but not for all of them. However, education of families with affected children will still be helpful through early diagnosis. A study recently published in *Pediatrics* demonstrated that this type of screening is costeffective when compared to other mass screening programs, such as those for

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effects of disparities in health care and outcomes of conditions such as diabetes and heart disease," Dr. Wilson said.

It is estimated that more than 350,000 Hoosiers have diabetes, and health officials believe that about one-third of these cases are undiagnosed. The disease costs Indiana more than

breast and prostate cancer," Dr. Graves said.

The benefits achieved are projected to affect the entire life-span of individuals when caught and treated early enough.

Weilin Long, director of the ISDH's Newborn Screening Programs, said that Indiana first began newborn screening in 1965 for phenylketonuria (PKU) only. PKU is produced by a deficiency in the



NEWBORN SCREENING PROGRAM TEAM works to assure that infants with defects receive appropriate medical interventions. They are (left to right) Clairece Owens, Shandra Haley, Cindy Brown, Iris Stone, Ronnie Reuveny, and Weilin Long.

*Photo by David Pilbrow**

enzyme phenylalanine hydroxylase and is associated with mental retardation, organ damage, and unusual posture. However, with careful dietary supervision, children born with PKU have been able to lead normal lives, and mothers who have the disease who have received appropriate interventions have been able to produce healthy children.

In 1978, testing for hypothyroidism was added. In the early 1980s, four additional genetic tests were included in the testing series, and the overall screening requirements were standardized.

In 1987, a surcharge was applied to make the testing program largely user supported.

\$2.2 billion each year in medical expenses, disability, lost wages, and premature mortality.

The "Too Sweet for Your Own Good" conference kicked off Diabetes Awareness Month, which promotes education to the public about the warning signs, risk factors, and possible serious health complications associated with diabetes.

Conference participants were able to choose from five of seven educa-

All testing is now performed by the Newborn Screening Laboratories at the Indiana University Medical School.

Long says that ISDH follow-up confirmations may include retesting and contacts with parents, physicians, and hospitals to assure that all required specimens are taken; tests performed; results reported to the state, to physicians, and to parents; parental genetic coun-

seling is offered; and interventions undertaken.

NBS staff at ISDH check testing records against recorded births in hospital discharge records, and then follow up as needed, depending upon reported test results.

Besides the heel-stick program, the NBS also oversees the Newborn Hearing and Meconium Screening programs. Meconium screening is performed for controlled substances in infants who meet certain at-risk criteria, like a current or past history of maternal drug use.

Long likes the Newborn Hearing Screening model for its centralized tracking function. She says ISDH uses it to assure that all infants are not only tested but test results reported, and then, as needed, followed up with appropriate retests and/or interventions. She thinks the model is well suited for tracking information in all of the newborn screening programs.

And Long gives much credit to the NBS team effort. "Our team works very well together. It's a big, big job for us everyday to locate babies to assure they all get tested and receive proper attention. This is the best team I've ever worked with," she said.

tional sessions, which were offered both in English and in Spanish. Topics included foot care and foot screenings, proper nutrition, tracking blood pressure and cholesterol, exploring myths and conquering fears about insulin therapy, monitoring blood sugar, preventing kidney failure, and avoiding blindness.

The ISDH Office of Minority Health, in collaboration with the ADA, sponsored the conference.

'Care Force' Serves At-Risk Seniors With Immunizations and Screenings







CARE FORCE VOLUNTEERS set up shop in a church gymnasium in LaGrange (left) on October 14, a Housing Authority meeting room in South Bend (center) on October 15, and in a squad tent in Indianapolis (right), near the Marion County Health Department, on October 17. The consortium of public and private agencies, together with the Air National Guard, provided flu and pneumococcal immunizations and an array of health preventive screenings for seniors who are at greater risk of illness. The locations illustrated above were among the nine sites across Indiana providing October Care Force services.

The Indiana Care Force, a statewide public/private partnership, provided free flu and pneumococcal immunization shots to Hoosier senior citizens from October 14 to October 18 in nine counties.

The free vaccinations were available October 14 in Allen, LaGrange, and Vigo counties; October 15 in Elkhart, Lake, and St. Joseph counties; October 16 in Delaware and Lake counties; and October 17 and October 18 in Marion and Vanderburgh counties.

In addition, free cholesterol, diabetes, preventive dentistry, vision, stroke, kidney, cancer, osteoporosis, and depression screenings; blood pressure and pulse readings; height and weight determinations; and medication education were

available in all the counties.

Public health officials say that senior citizens are at a much higher risk of death from influenza and pneumonia. In 2000, there were 1,126 deaths due to pneumonia and influenza among Indiana residents over 65 years of age.

The Indiana Care Force Program was formed to provide vital immunization and health care to elderly citizens, a targeted medically underserved population.

The groups that participated in the program are the Indiana Air National Guard; Indiana State Department of Health; Indiana Minority Health Coalitions; the nine local health officers and local health departments, including Allen, Delaware, Elkhart, LaGrange, Lake, Marion, St. Joseph, Vanderburgh,

and Vigo counties; Health Care Excel; LensCrafters; Indianapolis Fire Department; Gennesaret Free Clinic; American Heart Association; National Kidney Foundation of Indiana, Inc.; Roche Diagnostics; Merck; Mental Health Association in Indiana, Inc.; Anthem Blue Cross and Blue Shield; Indiana Pharmacist Alliance; American Cancer Society; and the Mental Health Association in Marion County.

For those persons whose screening tests indicated the need for medical intervention, Gloria French, ISDH Care Force program coordinator, said, "They were referred to their family physician first. If they did not have a family physician they were referred to one of the clinics in the area or, if the need was immediate, to a local hospital."

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Indiana's total attendance number at its immunization conferences.

Weaver spoke on "Nursing Issues in Immunizations" at each of the three conferences.

In addition, different keynoters were featured at each of the conferences. At Syracuse, James Conway, M.D., Riley Hospital, Indianapolis, spoke on the disease and immunization related issues of adopted immigrant children. At Clarksville, Richard Clover, M.D., a member of the national Advisory Committee on Immunization Practices, provided the Committee's latest update. And at West Lafayette, pediatric infectious disease specialist Christopher Belcher, M.D. addressed the issues of

vaccine misunderstanding and misinformation.

Each day also featured an "Ask the Experts" panel that included Michael Runau, ISDH Immunization Program manager, and Charlene Graves, M.D., and one or more of the keynote speakers.

A total of 164 awards were presented to providers, divided equally between local health departments and private providers attaining vaccination series rates greater than 90 percent in practices with 25 or more two-year-old children.

Of the 164 award winners, 25 providers attained 100 percent rates.

They are:

Provider	County
Benton County Health Department	Benton
Community Medical Associates	Clark
Auburn Family Medicine	Dekalb
Fayette County Health Department	Fayette
Jennings Family Care	Jennings
Dyer Pediatrics Services	Lake
Hemendra Parikh, M.D.	Lake
Project Precinct	Lake
Patel Pediatrics	Madison
East Washington Pediatrics	Marion
Georgetown Medical Care	Marion
Indianapolis Pediatric Association	Marion
IU Medical Group Banta Road	Marion
IUMG Forest Manor Health Center	Marion
Pediatric Care Center	Marion
Rajashree Mohanty, M.D.	Marion
Sunshine Pediatrics	Marion
Crawfordsville Pediatric Center	Montgomery
Spencer County Health Department	Spencer
Switzerland County Health Department	Switzerland
Ferry St. Pediatrics-Arnett Clinic	Tippecanoe
Greenbush Pediatrics-Arnett Clinic	Tippecanoe
Pediatric Association of Lafayette PC	Tippecanoe
Mohammed Hussain, M.D.	Vanderburgh
Warrick County Health Department	Warrick

Community Health Development Services Wins SECC Competition





The generosity of staff of the ISDH Community Health Development Services Commission helped them win the friendly competition among the five major divisions of the Indiana State Department of Health plus the State Health Commissioner's office. The winning team made the highest average-per-capita contribution of \$60.11 to the 2002-2003 State Employees Community Campaign (SECC) to support charitable community agencies and activities.

One of the "fringe benefits" for members of the winning team was to observe the leaders of the trailing teams wash the car of Joni Albright, who heads their winning Community Health Development Services Commission. The total amount donated to the SECC by all ISDH employees was \$28,131.40, or an average of \$40.25 per person, according to ISDH SECC Coordinator Marc LoCascio.

Halloween Inspires Epidemiology Resource Center Staff Creativity With a Distinctive Public Health Flair





A SURPRISE VISIT BY A GROUP OF EPIDEMIOLOGY RESOURCE CENTER STAFF to a management team meeting (left photo) draws laughter from Deputy State Health Commissioner Michael Hurst (left). The winged-costumed staff also make their appearance (right) on a walk-through of the Maternal and Child Health program area.

**Photo Credits: (left) by Daniel Axler and (right) by Tanya Hammer*

Customarily, ISDH has permitted staff to come to work on October 31 dressed in Halloween attire, but this may be the first time that group costuming has highlighted a current public health issue—the West Nile virus.

Smiles, laughter, and delighted surprise were some of the reactions of agency staff when they spotted the costumes of Epidemiology Resource Center colleagues at the Indiana State Department of Health on October 31. The "Epi" staff came dressed as mosquitos, together with epidemiologist Hans Messersmith costumed as a pressurized aerosol can of "35 percent DEET." DEET is the substance contained in mosquito repellants recommended by ISDH in media releases and Web site postings, seen over the summer and fall of 2002, to encourage the prevention of potentially fatal bites by mosquitos infected with the West Nile virus.

One of the squadron of mosquito-costumed staff punctuated the symbolic costuming with a label identifying her as a West Nile virus carrying mosquito.

Messersmith said, "The genius behind the project belongs rightfully to the creative talent of the ladies of the Data Analysis Team . . . What will they think of next year? I shudder to contemplate it."

LUNCH-HOUR CAR-WASH PERK (left photo) is delivered by State Health Commissioner Greg Wilson, M.D. (left), Assistant Commissioner Wendy Gettelfinger (right foreground) and Deputy Health Commissioner Michael Hurst to Assistant Commissioner Joni Albright's car. To win the car wash, Albright headed the group that made the highest average-per-capita contribution to the 2002/2003 State Employees Community Campaign.

JONI ALBRIGHT BEAMS (in the right photo behind the "No Parking Today" signs) in response to the acknowledgment by Deputy Commissioner Michael Hurst (left) of the "virtual" presence of Assistant Commissioner Liz Carroll at the car wash. Carroll, who missed the event, was away on an information-sharing goodwill visit to local health departments but is represented, to the left of Hurst, by a photo and jacket with the "LIZ" label. Other members of the car wash crew, appearing in the photo to the right of Hurst (left to right), are Wendy Gettelfinger, assistant commissioner, Children and Family Health Services; State Health Commissioner Greg Wilson, M.D.; and Joe Hunt, assistant commissioner, Information Services and Policy, to the right of Albright. Car wash photos by Daniel Axler



For a wealth of health information, administrative rules, and data, see the Indiana State Department of Health Web site:

http://www.IN.gov/isdh



Express

The Indiana State Department of Health Express is a bi-weekly publication for ISDH employees and stakeholders. To submit news items, call (317) 233-7336 or send information to: ISDH Express, Office of Public Affairs, 2 N. Meridian St., Section 2E, Indianapolis, IN 46204-3003. Inquiries should be directed to:

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NewsLink

A Monthly Publication for Local Health Departments

Friday, November 15, 2002

ISDH 'Friendship Tours' Answer Questions, Update Staffs of Local Health Departments



ISDH STAFF pictured above represent some of those participating in Friendship Tour visits to local heath departments during October and November. Left to right they are Howard Cundiff, director, Consumer Protection; Liz Carroll, assistant commissioner, Health Care Regulatory Services; Alan Dunn, supervisor, Residential On-Site Sewage Disposal; and Mike Hoover, supervisor, Environmental Health section.

Photo by Daniel Axler

ISDH Consumer Protection staff have been out visiting with staff members of 16 local health departments at 12 health department locations.

Stretching from the last part of October into the first part of November, ISDH staff made "Friendship Tour" visits during two days in each of three consecutive weeks.

ISDH staff visited with local health department staff from the following counties during week one—DeKalb, Grant, Howard, Huntington, Noble, and Steuben; during week two—Daviess, Greene, Lawrence, Monroe, Knox, and Warrick counties; and in week three—Dearborn, Decatur, Harrison, and Jennings counties.

Liz Carroll, assistant commissioner, Health Care Regulatory Services, and Howard Cundiff, director of the Consumer Protection unit, were accompanied by various ISDH consumer protection and environmental health staff on each stop.

"We billed the visits as Friendship Tours to give us the opportunity to go out and share information that we thought would be of interest to the local health departments and then listen to what they had to say in response about issues—whether positive or negative," Carroll said.

The half-day visits at each health department offered an opportunity for ISDH staff to update attendees on the state's bioterrorism and emergency preparedness initiative and on current and proposed administrative rule changes affecting both on-site wastewater treatment and food protection, as well as on other areas.

ISDH staff also discussed free training opportunities that

ISDH makes available with an emphasis on the travel stipends that ISDH provides to the LHDs to help staff get to the regional training sites.

To prepare for the visits, Cundiff says he asked ISDH staff to alert him to any news items he could communicate and to identify any "hot" issues. He says that staff reported no major problems but feedback from staff gave him an abundance of items to communicate to the LHDs.

During the friendship visits, ISDH staff encouraged local health department staffs to ask questions. Cundiff said that Liz Carroll's opening remarks at each visit site created a comfort level that invited LHD staff to ask questions and voice criticisms. And there were many questions.

"I recorded them all," he said. "We invited ISDH field people to participate on the visits to help answer questions. However, a few questions needed responses from staff specialists not on the tour. Those questions are being referred to appropriate staff in central office," Cundiff said.

Carroll said, "We knew we'd be getting questions about new (administrative) rules, so we spent some time talking about that issue. We also anticipated questions about bioterrorism so we also spent time researching that issue area before we left (for the tours)."

Perhaps the most unusual tour question relating to food safety was raised at the Huntington County Health Department. Cundiff says that the department's environmentalist had confiscated a bag of dried lizards attached to sticks that cooks in a local Chinese restaurant said they used to impart energy (Chi?) to their soup when stirred with the lizard-sticks. Apparently, a box of the lizards had been discovered under the kitchen furnace during a routine inspection of the restaurant.

There was a question about the sluggishness of software used to transmit Children and Hoosiers Immunization Registry Program (CHIRP) data, and the interference it was causing with incoming calls on their single outside phone line. The questioner received assurance that installation of a new separate high-speed T1 transmission line would solve the connectivity problem. (The installation of T1 lines, planned for all health departments, is part of the state's bioterrorism and emergency response preparedness effort now underway.)

Cundiff said that one worried questioner asked how the new T1 lines would be paid for—by reimbursement or purchase by

the health departments? He was relieved when he learned that payment issues would not affect his health department's budget because ISDH would be purchasing the equipment and delivering it to the LHDs.

The availability of technical information on ISDH's Web site was another topic discussed. Cundiff says that a number of LHD staffs were unaware of the wealth of supportive technical, statistical, and training information available at the ISDH Web site (http://www.IN.gov/isdh).

"Some of them didn't know our ISDH Web site address," Carroll said. Cundiff said he presented a summary of the information found there and mentioned the speed and convenience for those LHDs who use the ISDH Web site to retrieve needed information.

"We already sent a note to Margaret Joseph (director, Office of Public Affairs) about the value of a poster advertising the Web site," Cundiff said.

"Margaret expressed interest in working on this," Carroll added.

Some LHD staff expressed being at a loss on how to proceed with meeting HIPAA requirements and wondered if ISDH could help with developing policies and pro-

cedures, according to Cundiff.

Cundiff said several LHD staff expressed appreciation for the *Food Bytes* newsletter covering food protection issues.

LHD staff in Daviess County expressed appreciation for the efforts of ISDH Epidemiologist Pam Pontones and Communicable Disease Nurse Consultant Julia Butwin, according to Cundiff.

Cundiff says that although there were no questions about the West Nile virus, there were many anecdotes.

"I've just hit a bird with my car; can you come pick it up?" was a phone inquiry an LHD received, according to Carroll.

"I've got a tree dying next to a dead bird; what should I do?" was asked on another call. Cundiff says that one caller requested health department assistance to retrieve bird feathers that had blown into her yard from a dead bird in a neighbor's yard.

One LHD staff asked whether it was appropriate to ask ISDH staff to show ID when they were not recognized.

Cundiff said, "Yes, all ISDH staff carry ID and are required to produce it whenever requested while representing the State Department of Health."

Health Officials Address PCB Issues



AT LAWRENCE COUNTY MEDICAL SOCIETY LUNCHEON, Lawrence County Health Officer Alan Smith, M.D. (left) converses with luncheon keynote speaker Dan Hryhrorczuk, M.D., University of Illinois Hospitals, Great Lakes Center for Children's Health (center), who addressed PCB issues, and Mark Johnson, Ph.D., senior environmental health scientist, Agency for Toxic Substances and Disease Registry, DHHS, who made a presentation at an evening presentation open to the public, November 6.

Photo by Daniel Axler

On Wednesday, November 6, health officials gave a health education presentation about PCBs to residents of Bedford and its surrounding communities at Parkview Elementary School Cafeteria in Bedford.

Topics discussed included highlights from the Summer 2002 Bedford Citizens' Health Education Needs Assessment, the history of and misconceptions about PCBs, exposure pathways and risks, and health and safety tips for residents.

LaNetta Alexander, environmental epidemiologist, and Barbara Gibson, health education consultant, both with the State Department of Health, and Mark Johnson, toxicologist with the Agency for Toxic Substances and Disease Registry, were the presenters.

A health education session on PCBs was also held for local physicians and nurses on November 6, from noon to 1 p.m., as a part of the monthly luncheon meeting of the Lawrence County Medical Society in Bedford.

Bioterrorism Preparedness & Response Grant Update

- ISDH submitted its semi-annual progress report by November 1 to the CDC for the Bioterrorism Preparedness & Response Supplemental Grant.
 - Six of the 14 critical benchmarks in the Preparedness & Response Grant have already been met,
 - six of the other benchmarks are scheduled to be met within the next two months, and
 - the two other benchmarks will be met by the end of March.
- The Crisis Communication Plan required by the Grant has been completed and is posted on the ISDH Web site, at http://www.in.gov/isdh, then click on Emergency Response.
- In the past few weeks, more than half of the 46 new positions being created as
 a result of the Grant have been listed on the State Job Bank, at http://www.in.gov/jobs/stateemployment/jobbank.html.
- The ISDH Internal Smallpox Committee is working on its post-event vaccination plan, which is scheduled for completion by December 1.

Indiana State Department of Health NewsLink

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